

**Amendment #2  
to RFP-NIH-NIAID-DMID-03-06  
"In Vitro Antiviral Screening Program"**

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<b>Amendment to Solicitation No.:</b>	NIH-NIAID-DMID-03-06
<b>Amendment No.:</b>	2
<b>Issue Date:</b>	November 21, 2002
<b>Proposal Intent Sheet Due Date:</b>	<b>Monday December 16, 2002.</b>
<b>Proposal Due Date:</b>	January 15, 2003, at 4:00 P.M. local time
<b>Issued By:</b>	Paul D. McFarlane Senior Contracting Officer NIH/NIAID Contract Management Branch 6700 B Rockledge Drive Room 2230, MSC 7612 Bethesda, Maryland 20892-7612
<b>Point of Contact:</b>	Karim F. Hourani, Contract Specialist khourani@niaid.nih.gov
<b>Name and Address of Offeror:</b>	To All Potential Offerors

The above numbered solicitation is amended as set forth below. The hour and date specified for receipt of proposals **HAS NOT** been extended. Offerors must acknowledge receipt of this amendment. Failure to receive your acknowledgement of this amendment may result in the rejection of your offer. This amendment shall be acknowledged in the following manner:

- By acknowledging receipt of this amendment on each copy of the offer submitted.

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**AMENDMENT PURPOSE:** To replace the "Proposal Intent Response Sheet", Section J – List of Attachments, with an updated version and to add additional guidance in Section L under item 2.a. (General Instructions).

- 1.) Replace the "Proposal Intent Response Sheet", Section J – List of Attachments, **page 24** with the updated version, dated October 22, 2002, provided below.

## PROPOSAL INTENT RESPONSE SHEET

**RFP:** NIH-NIAID-DMID-03-06

**RFP Title:** In Vitro Antiviral Screening Program

Please complete and return this page by **Monday, December 16, 2002**. NIAID appreciates knowing if your institution intends to submit a proposal, as this will assist the NIAID in planning for proposal evaluation.

[ ] OUR INSTITUTION **DOES INTEND** TO SUBMIT A PROPOSAL Your expression of intent is not binding.

[ ] OUR INSTITUTION DOES **NOT INTEND** TO SUBMIT A PROPOSAL FOR THE FOLLOWING REASON(S):

IDENTIFY WHICH OF THE WORK STATEMENT PARTS (I.E. RESEARCH AREA -A or RESEARCH AREA -B) FOR WHICH YOU INTEND TO SUBMIT A PROPOSAL.

Company/Institution Name (print): \_\_\_\_\_

Address (print): \_\_\_\_\_

Name of Proposed Project Director or Principal Investigator (print): \_\_\_\_\_

Telephone and FAX Number and E-mail Address: \_\_\_\_\_

Signature/Date: \_\_\_\_\_

Since your proposal will be submitted electronically, include the name and e-mail of the individual to whom NIAID should provide electronic proposal instructions (i.e. login code and password).

Name, Title: \_\_\_\_\_

Telephone and FAX Number and E-mail Address: \_\_\_\_\_

List individuals (currently on staff with your institution) whom you plan to name in the proposal. Identify your collaborators, subcontractors and/or consultants. List the names of individuals (currently on staff) whom they plan to include in their proposal(s). Use extra pages if necessary. The NIAID uses this information for proposal review planning, specifically, to create a list of potential review panelists. The NIAID is careful to avoid conflicts of interest when assembling these panels. Therefore, it's important that you only name those institutions and individuals most likely to be part of your proposal. Contact the individual named below with any questions.

COMPLETE AND RETURN THIS SHEET VIA FAX OR E-MAIL TO:

CMB, DEA, NIAID, NIH, DHHS

Attention: Karim F. Hourani, Contract Specialist

Reference: RFP NIH-NIAID-DMID-03-06

6700-B Rockledge Drive, MSC 7612, Room 2230

Bethesda, MD 20892-7612 FAX# (301) 402-0972, Email: [khourani@niaid.nih.gov](mailto:khourani@niaid.nih.gov)

**FORM VERSION DATE: October 22, 2002**

**(2) The following provision applies to this solicitation and is hereby incorporated into Section L under item 2.a.  
(General Instructions):**

- Guidance Regarding Federal Government Collaborations

In keeping with FAR 3.6 and recent legal decisions involving conflict of interest issues, it is the policy of the NIAID that any proposal either submitted by a Federal agency or submitted by an Offeror that includes the collaboration of a Federal agency or Federal employee must include a letter describing the role and effort being provided by that government agency and/or employee and stating that: (1) no actual or appearance of a conflict of interest exists with the proposed effort; and (2) the collaborator's supervisor is aware of and approves of the effort. This letter **must** be signed by both the designated agency ethics official (DAEO) and the head of the agency (or his/her designate). The NIAID reserves the right to reject a proposal that includes effort by Federal government employees in order to avoid any actual or appearance of a conflict of interest.

END OF MODIFICATION #2 TO RFP NIH-NIAID-DMID-03-06